

May 27, 2003

David Martinez
TWCC Medical Dispute Resolution
4000 IH 35 South, MS 48
Austin, TX 78704

MDR Tracking #: M2-03-0740-01
IRO #: 5251

___ has been certified by the Texas Department of Insurance as an Independent Review Organization. The Texas Worker's Compensation Commission has assigned this case to ___ for independent review in accordance with TWCC Rule 133.308 which allows for medical dispute resolution by an IRO.

___ has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, all relevant medical records and documentation utilized to make the adverse determination, along with any documentation and written information submitted, was reviewed.

The independent review was performed by a matched peer with the treating doctor. This case was reviewed by a licensed Medical Doctor with a specialty and board certification in Orthopedic Surgery. The ___ health care professional has signed a certification statement stating that no known conflicts of interest exist between the reviewer and any of the treating doctors or providers or any of the doctors or providers who reviewed the case for a determination prior to the referral to ___ for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to the dispute.

CLINICAL HISTORY

___ is a 26-year-old gentleman who injured his lower back while working on ___. He attempted to loosen a large bolt that was already loosened and he fell on a trolley. He noted severe pain in his lower back with radiation into the right buttocks and into the front of the right thigh. He also had parasthesias and numbness going into the right foot and great toe area. The patient was worked up for his back pain with x-rays and was given physical therapy along with medication for pain and muscle spasm. His symptoms were slow to improve. An MRI was done that demonstrated apparent disc herniation at L3/4 and L4/5. The patient did not respond to the above conservative treatment, so he was sent for a series of lumbar epidural steroid injections. These were given, but did not give him any real significant degree of relief.

He was referred to ___, an orthopedic surgeon, who felt that the patient was a candidate for surgical treatment, since all conservative treatment had failed.

He saw ___, also an orthopedic surgeon, on July 25, 2000, and ___ agreed that the patient was a candidate for surgery because of the failed conservative treatment.

The carrier did not approve the surgery. This patient's symptoms continued and the patient saw ___ who also agreed that surgery was indicated. Again, the carrier did not approve the surgery. The patient went through a four-level lumbar discogram on May 30, 2002. This discogram demonstrated large disc herniations at L3/4 and L4/5 with tears in the annulus at those two levels.

There was rather severe central anal stenosis reported along with stenosis of the lateral recesses and neural foramina reported at L4/5. The large disc herniation was reported in the L3/4 area.

___ has requested authority to do IDET procedure on this patient. This was not approved by the carrier because of the fact that the imaging studies demonstrate nerve root compression and a considerable amount of external pressure from the rather significant disc herniation at two levels.

REQUESTED SERVICE

An outpatient IDET procedure is requested for this patient.

DECISION

The reviewer agrees with the prior adverse determination.

BASIS FOR THE DECISION

With reference to Saul & Saul's study on IDET procedure that was presented at the fifteenth annual meeting of the North American Spine Society in ___ in the year 2000, the findings of this patient's discogram make the IDET procedure contraindicated. This patient has a considerable amount of disc material that is herniated and he has large annular tears with stenosis of both the spinal canal and the intervertebral foramina. Therefore, with these findings, the IDET procedure is contraindicated.

___ has performed an independent review solely to determine the medical necessity of the health services that are the subject of the review. ___ has made no determinations regarding benefits available under the injured employee's policy.

As an officer of ___, I certify that there is no known conflict between the reviewer, ___ and/or any officer/employee of the IRO with any person or entity that is a party to the dispute.

___ is forwarding by mail and, in the case of time sensitive matters by facsimile, a copy of this finding to the treating doctor, payor and/or URA, patient and the TWCC.

Sincerely,

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

In the case of prospective *spinal surgery* decision, a request for a hearing must be made in writing and it must be received by the TWCC Chief Clerk of Proceedings within 10 days of your receipt of this decision. (20 Tex. Admin. Code 142.5(c)).

In the case of other *prospective (preauthorization) medical necessity* disputes a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin. Code 148.3).

This decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin. Code 102.4(h) or 102.5(d)). A request for a hearing should be sent to: Chief Clerk of Proceedings, Texas Worker's Compensation Commission, P.O. Box 40669, Austin, TX 78704-0012. A copy of this decision should be attached to the request.

The party appealing this decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute, per TWCC rule 133.308(t)(2).

<p>I hereby certify, in accordance with TWCC Rule 102.4 (h), that a copy of this Independent Review Organization decision was sent to the carrier, requestor, claimant (and/or the claimant's representative) and the TWCC via facsimile, U.S. Postal Service or both on this 27th day of May 2003.</p>
